

# LADTAG Progress 2010 and Plans for 2011

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# Overview

- Pilot ITI Studies: lavage & histopath
- Core ITI Studies: lavage & histopath
- Macrophage activation studies: lavage
- Inhalation plan: 2 concentrations + control
- Grinding dust/size fractionation
- Dissolution studies
- Cellular studies
- Ocular studies
- Dermal studies



# ITI Studies

- Pilot studies at NIOSH for dose ranging
- Core studies at NIOSH with 7 and 30-day assessment of lavage fluid/blood
- Benchmark dose modeling of useful endpoints
- Core studies with 4 w and 13 w harvesting for histopathology



# Inhalation plan

- One week inhalation study of lunar dust simulant to demonstrate nose-only chamber performance
- Four-week study of authentic lunar dust ground to a respirable size
- Exposures
  - Control air
  - 25 mg/m<sup>3</sup>
  - 75 mg/m<sup>3</sup>
- Endpoints taken as follows
  - Lavage fluid
  - Histopathology



# Supporting Studies

- Progress on grinding and size separation
- Dissolution studies of metals from dust at various pH levels with morphological changes
- Cellular studies of simulant and readiness for use of authentic lunar dust
- Ocular studies-in vitro results and in vivo plan
- Dermal studies-comments and progress on manuscript



# Provisional PEL for Moon Dusts

- Based only on 7 and 28 day post-dosing lavage fluid data and blood markers
- Five dusts were used to dose rats at three concentrations
- Used EPA benchmark software to estimate a BMD10 for each dust
- Compared BMD10s to known PELs to estimate PEL of dusts with unknown PELs



# Provisional PELs from Lavage and Blood Data

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# Pathway

- For each endpoint and all 5 dusts, inspect dose-response curves for effect
- Determine if all curves for a given endpoint will produce a BMD10 (TiO<sub>2</sub> may not)
- Fit the best of the 5 EPA benchmark curves to the dose response curve for each dust and endpoint
- Compare the BMD10s and PELs on a log-log basis to estimate PPELs from each endpoint

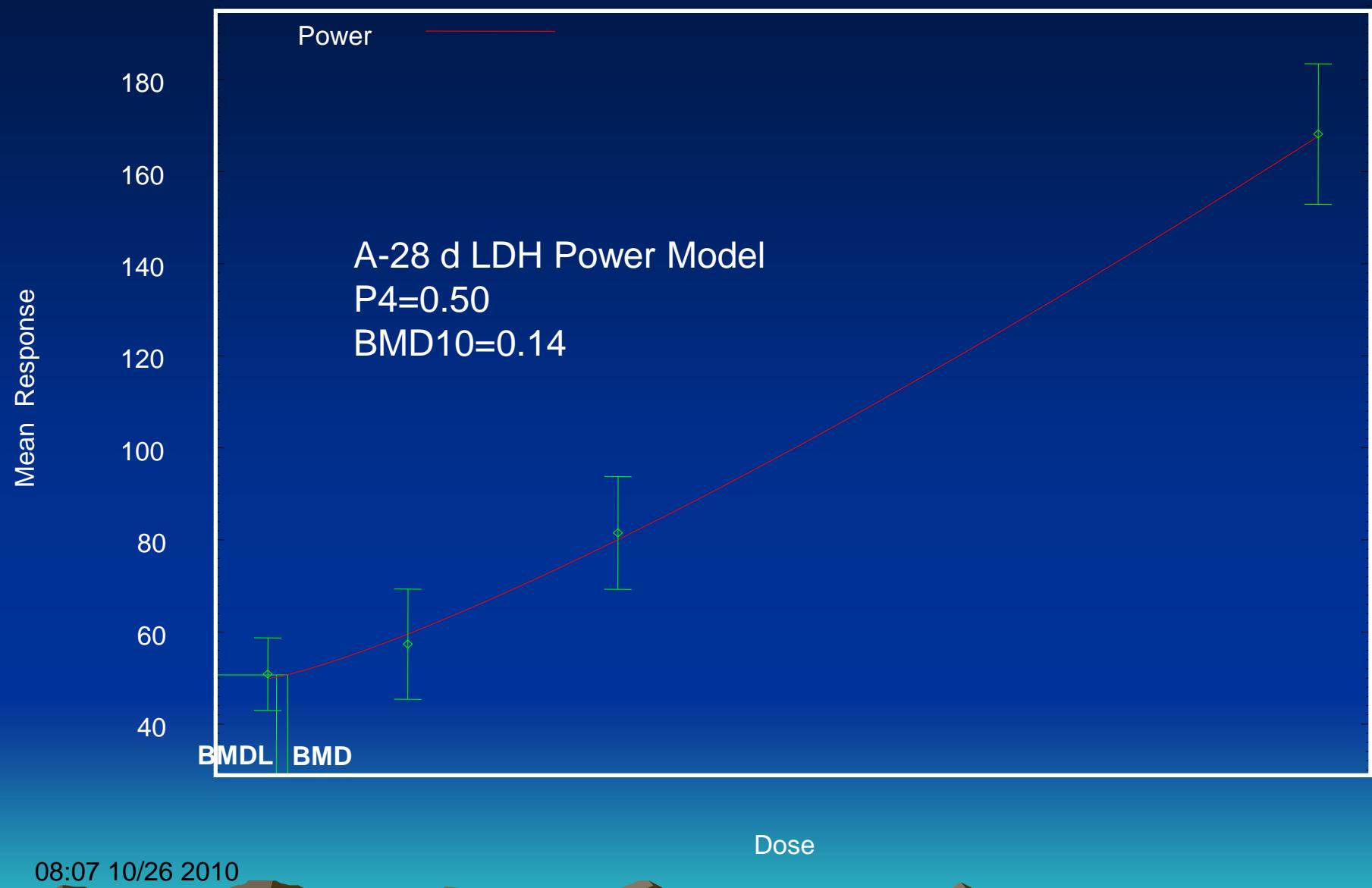


# Inspect Dose Response Profiles

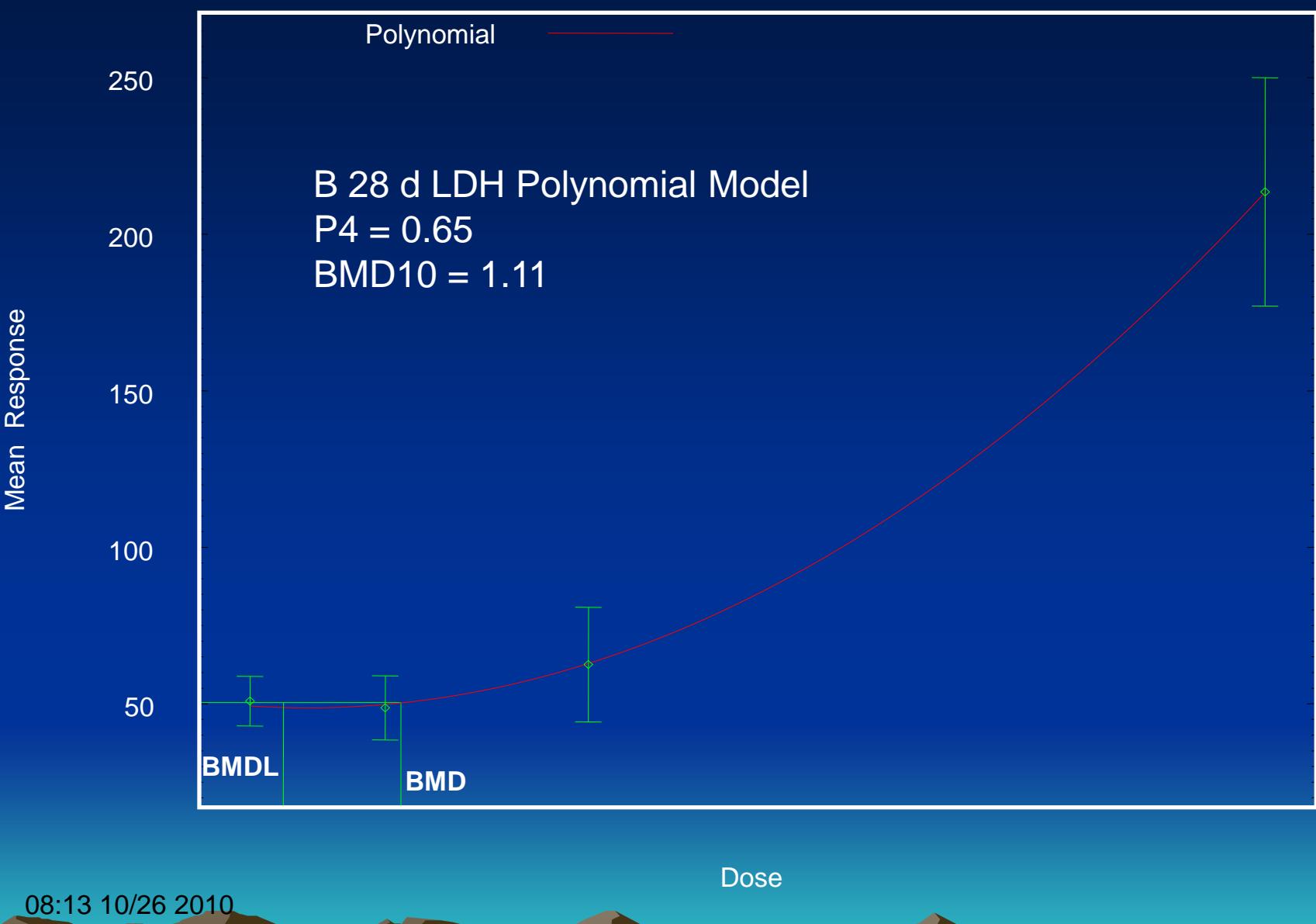
- No chance
- Maybe useful
- Likely to be useful



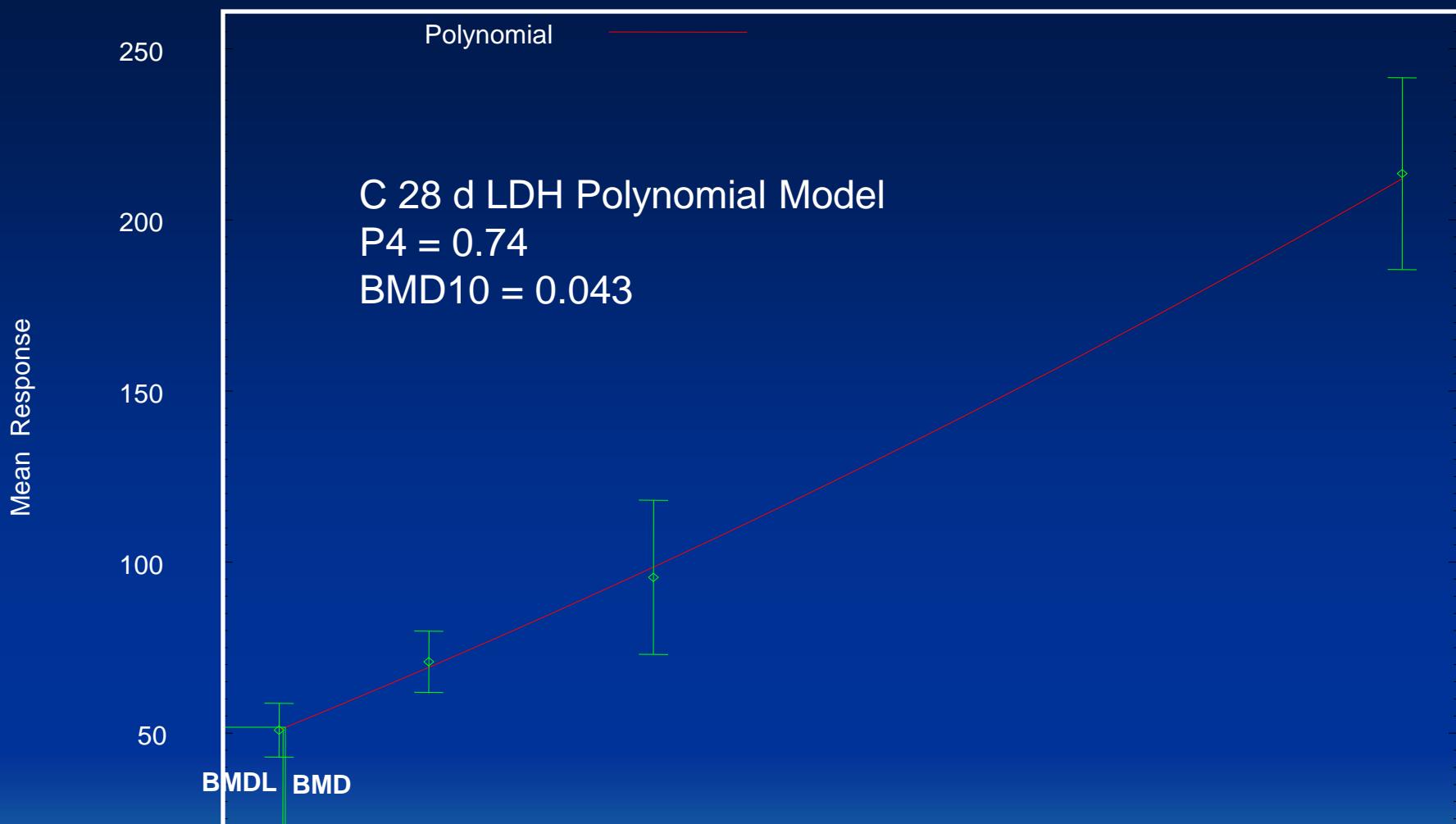
# Power Model with 0.95 Confidence Level



# Polynomial Model with 0.95 Confidence Level



Polynomial Model with 0.95 Confidence Level



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# Hill Model

Mean Response

450

400

350

300

250

200

150

100

50

Hill

D 28 d LDH Hill Model

P4 = 0.57

BMD10 = 0.0034

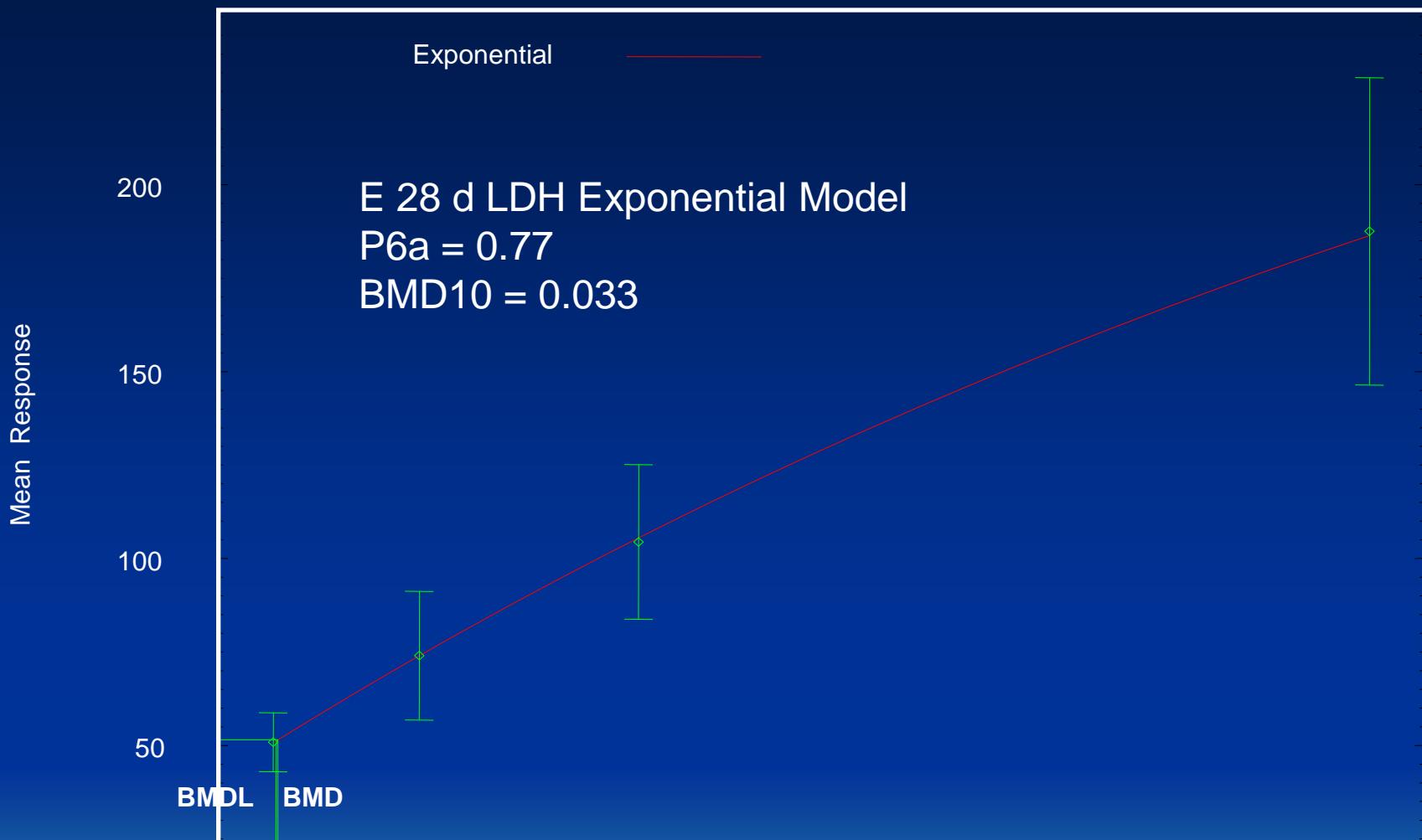
BMD



Dose

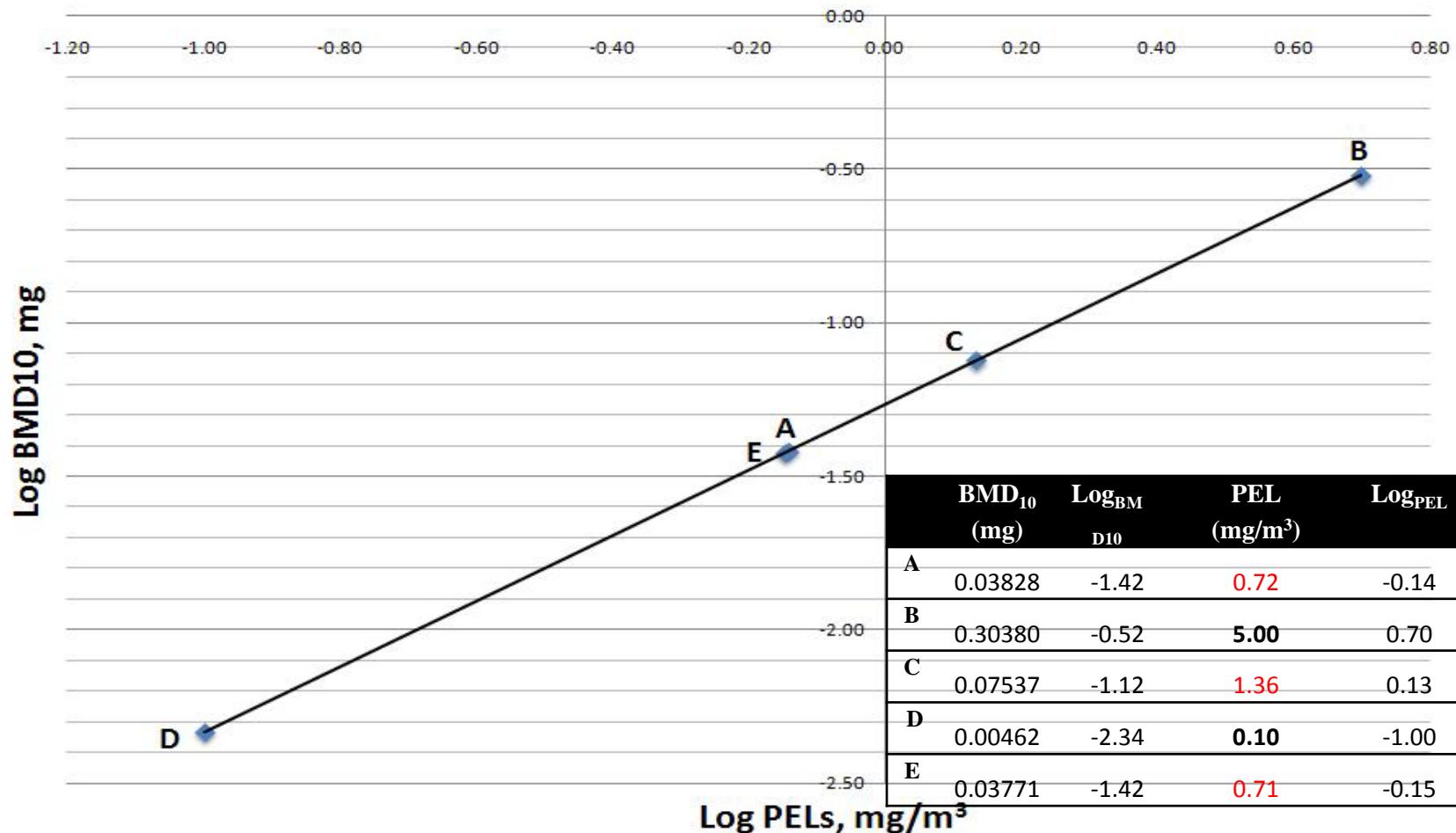
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### Exponential Model 4 with 0.95 Confidence Level

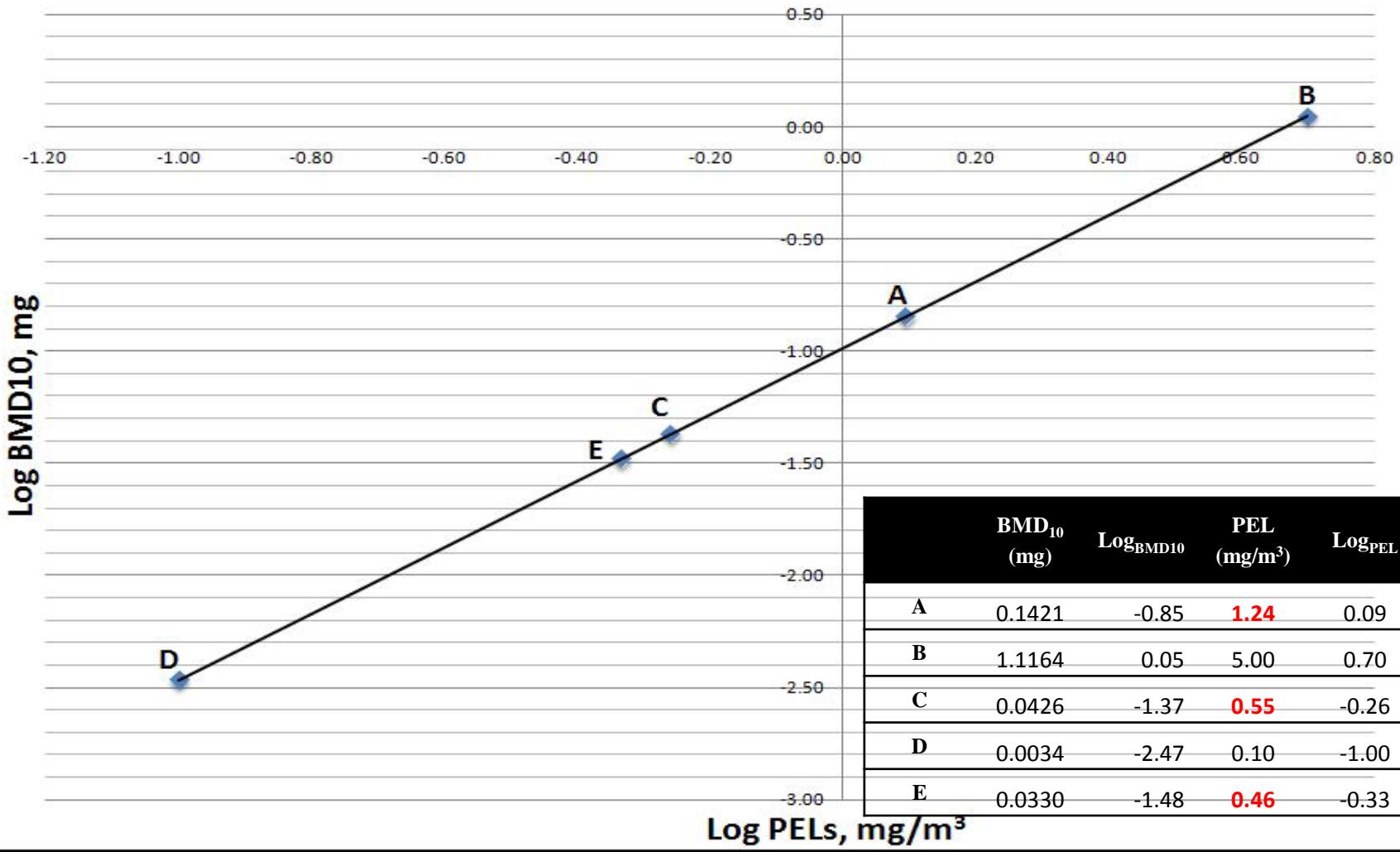


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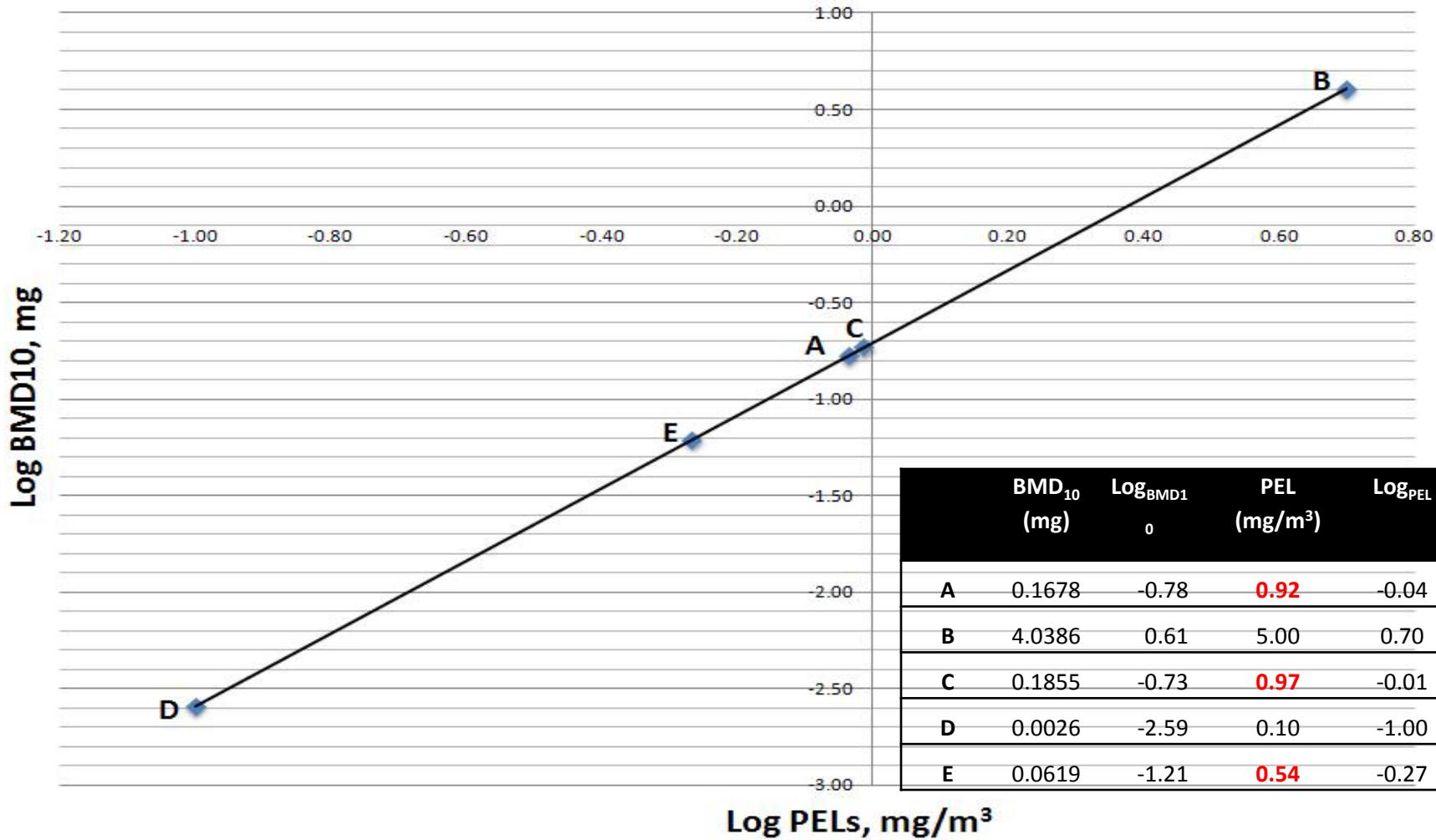
# Lactate Dehydrogenase 7 Day Mark



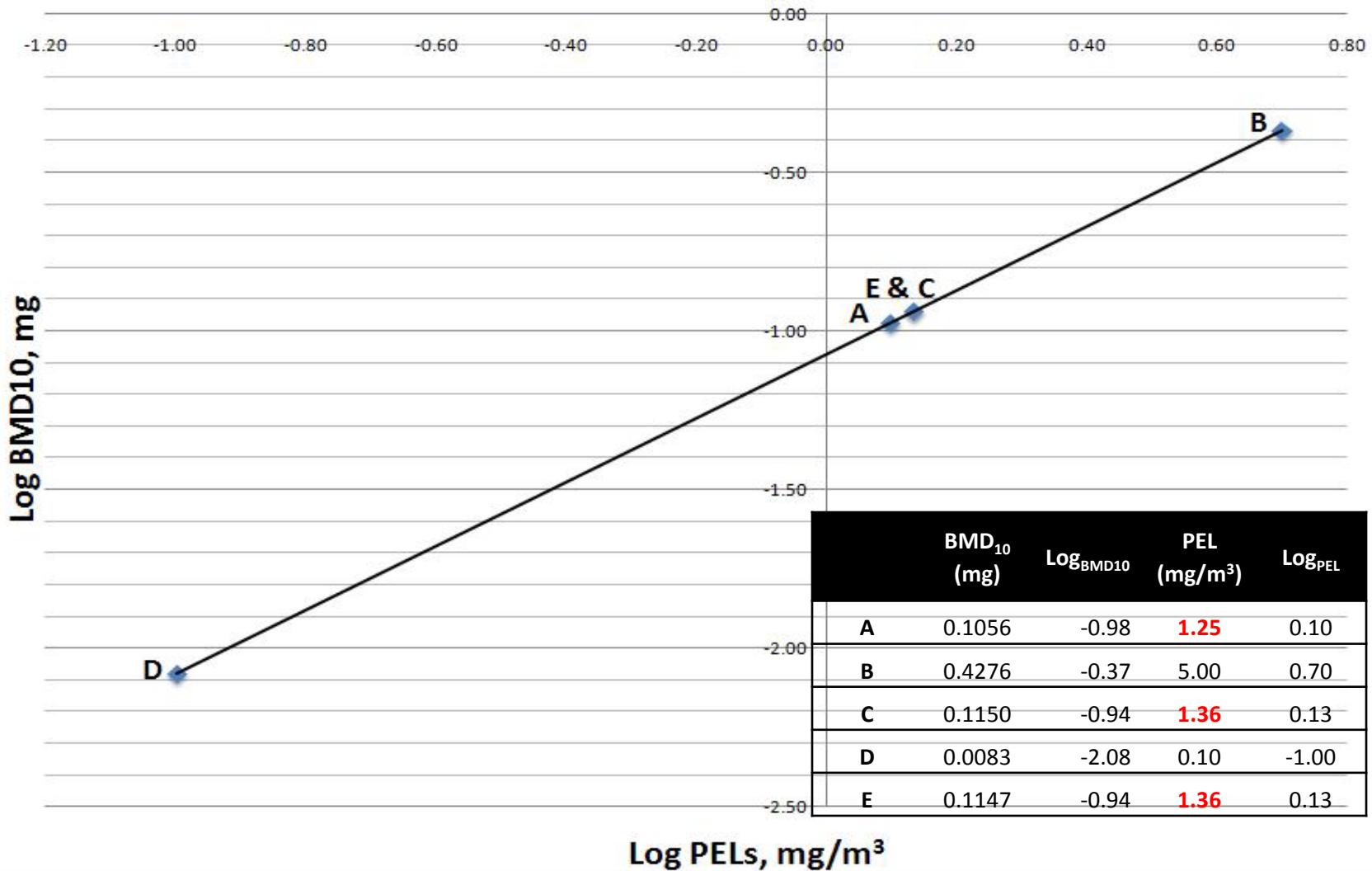
## Lactate Dehydrogenase 28 Day Mark



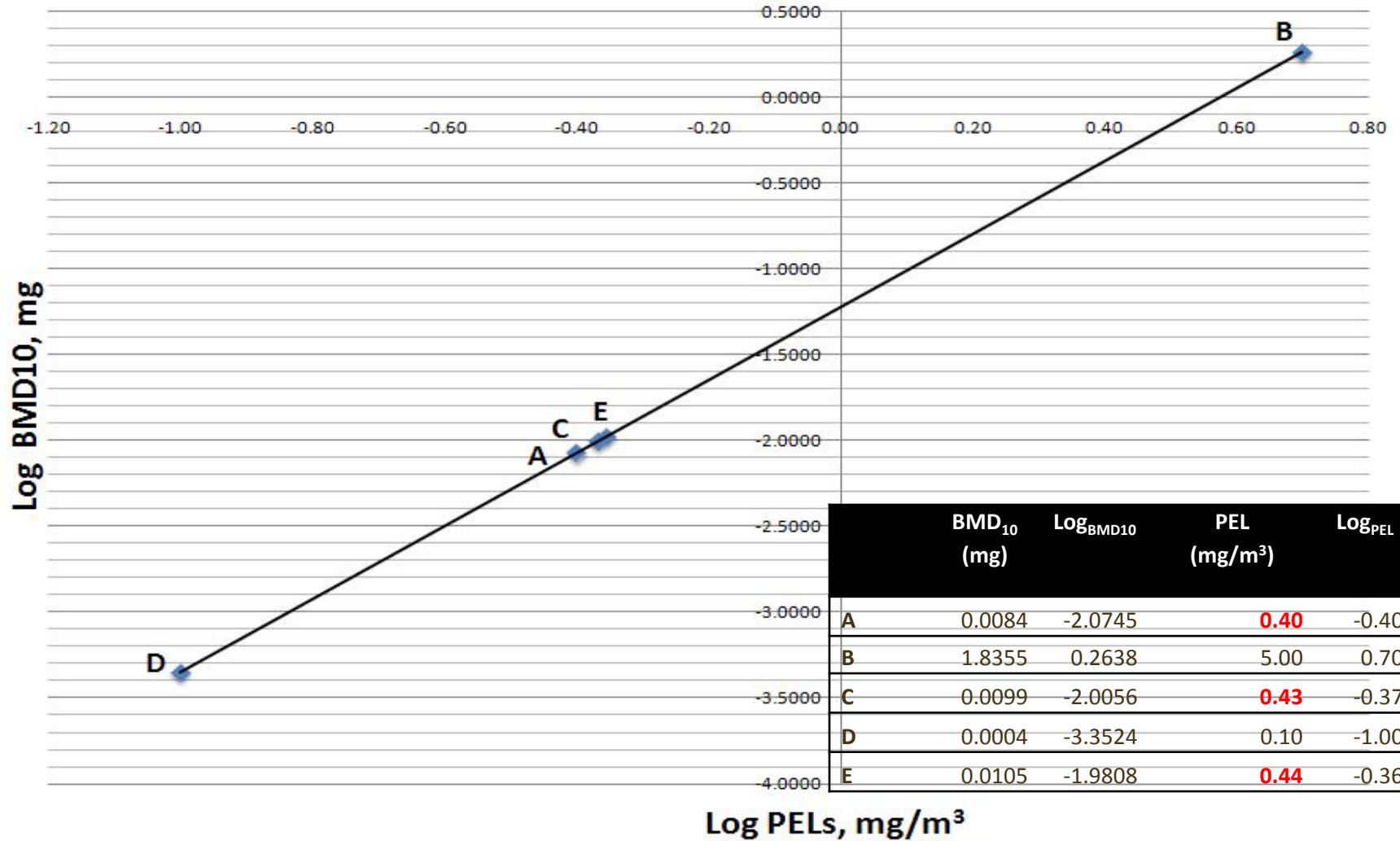
# Total Cell Count 7 Day Mark



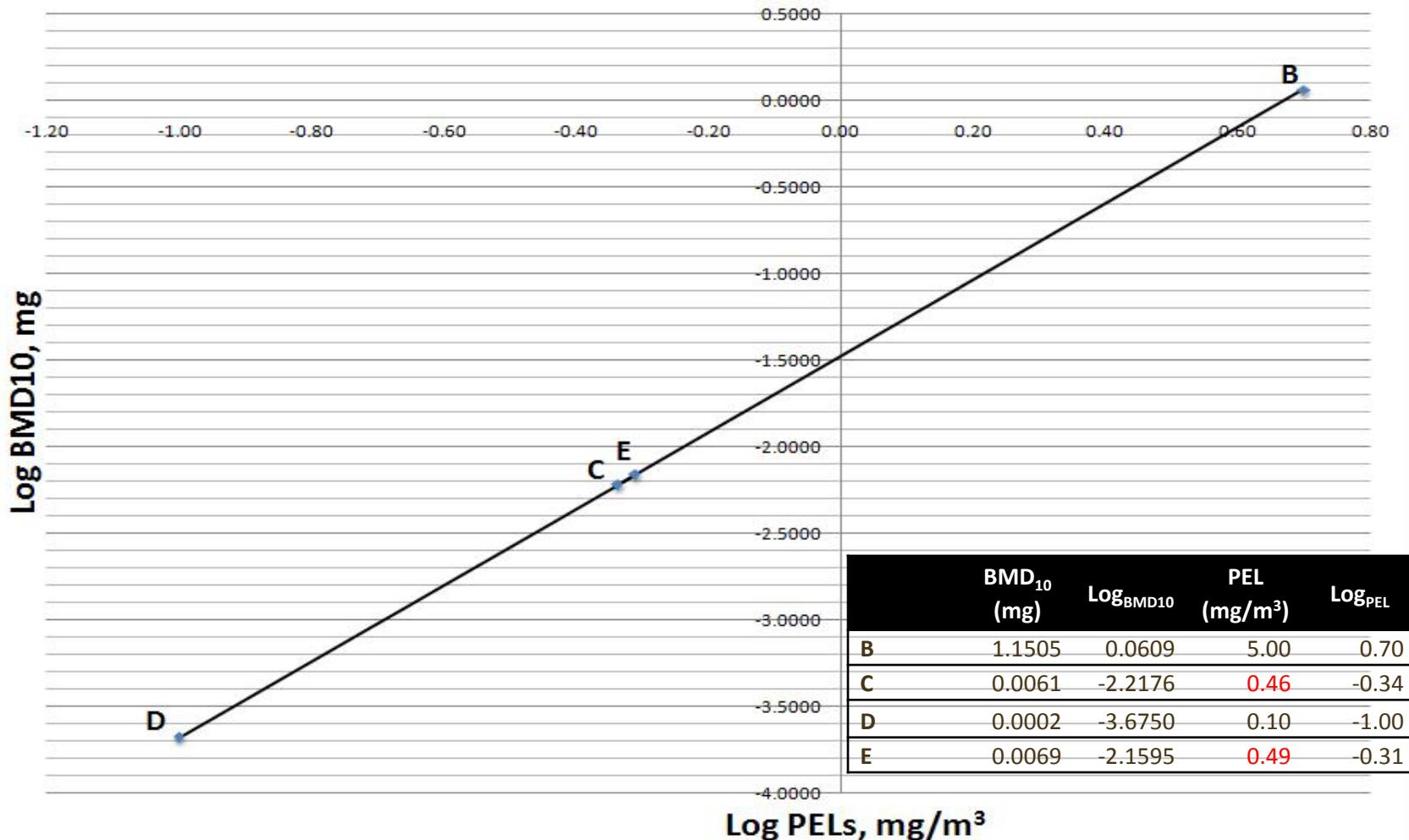
# Total Cell Count 28 Day Mark



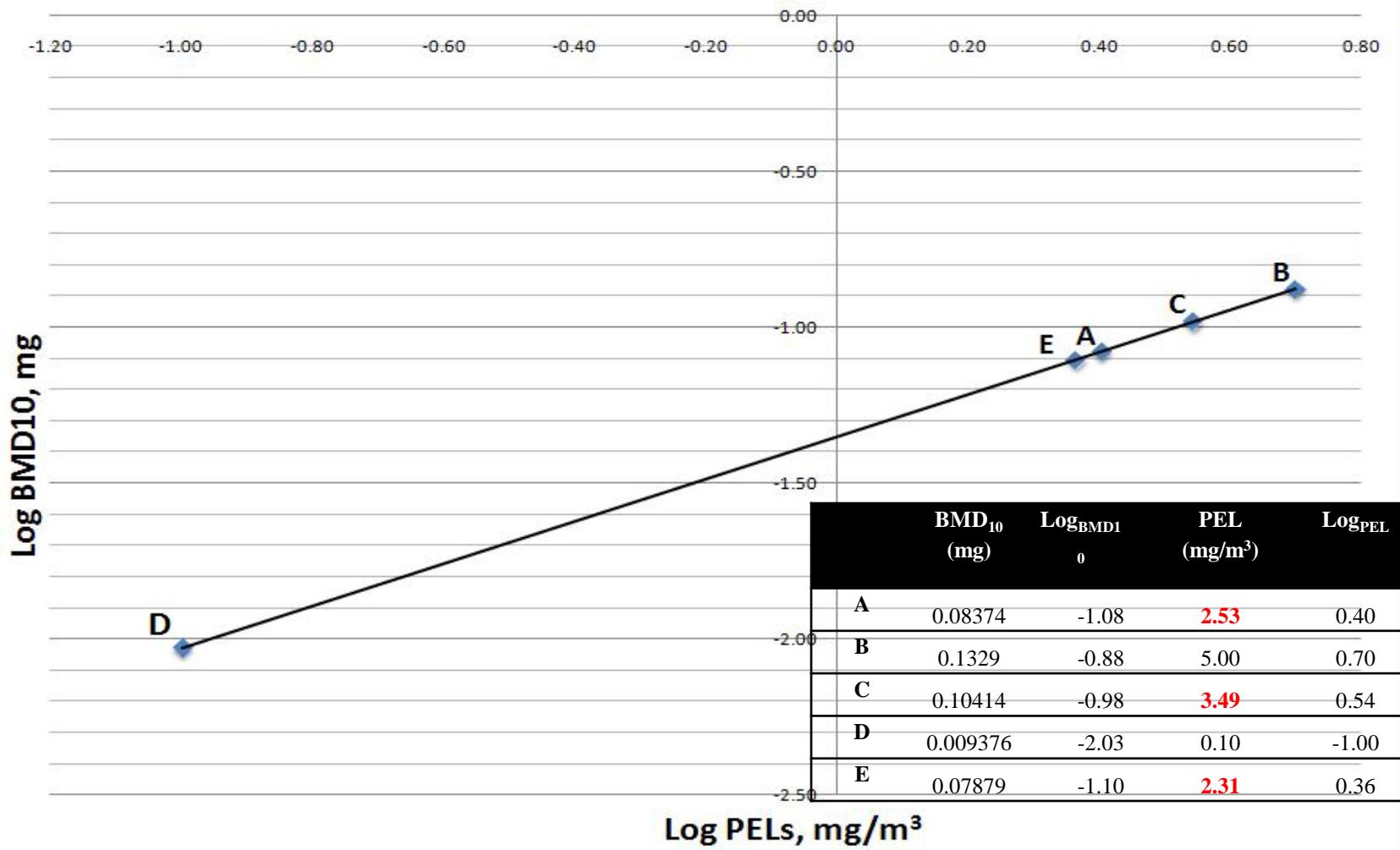
# % Neutrophil Cell Differential 7 Day Mark



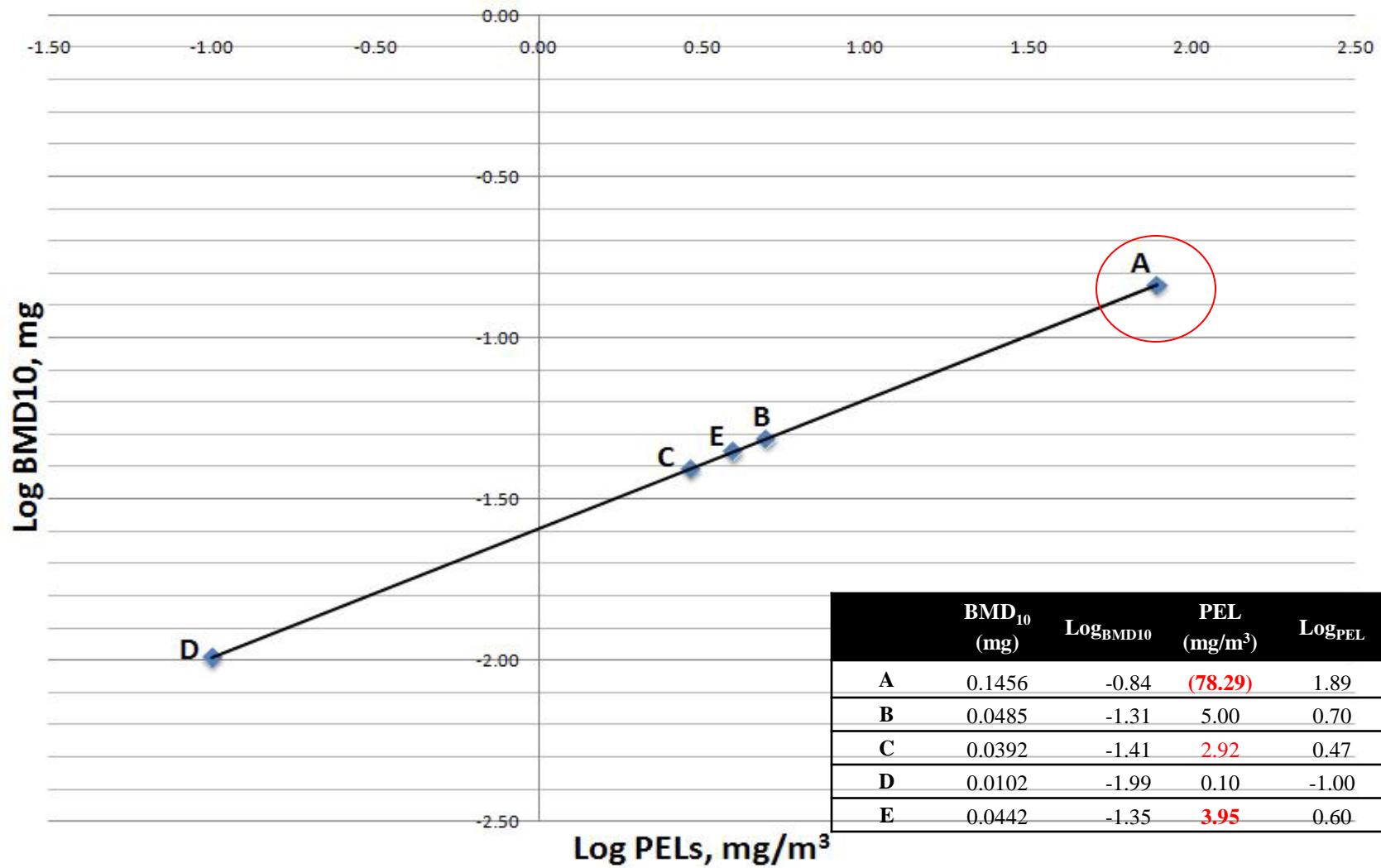
## % Neutrophil Cell Differential 28 Day Mark



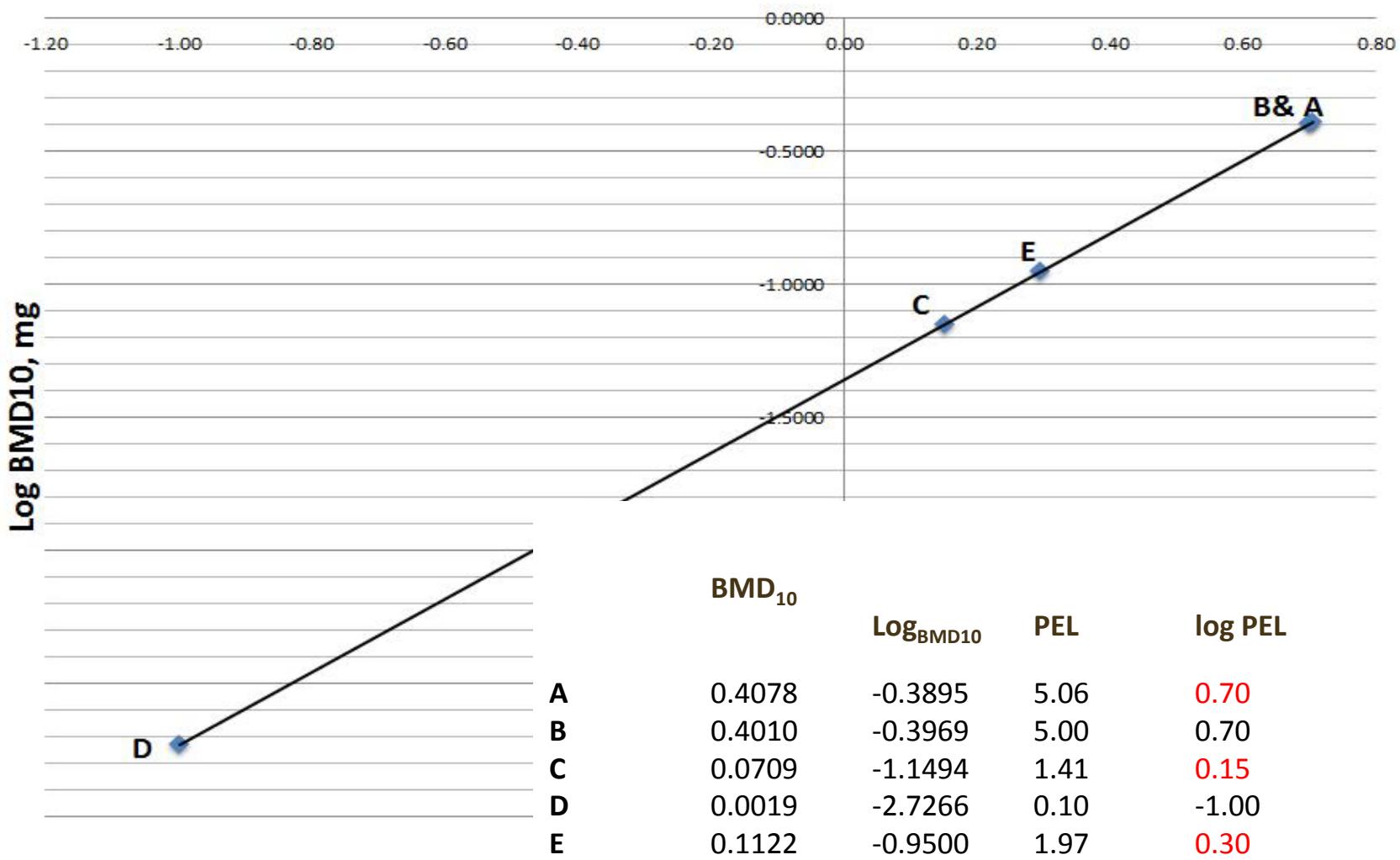
# Total Protein 7 Day Mark



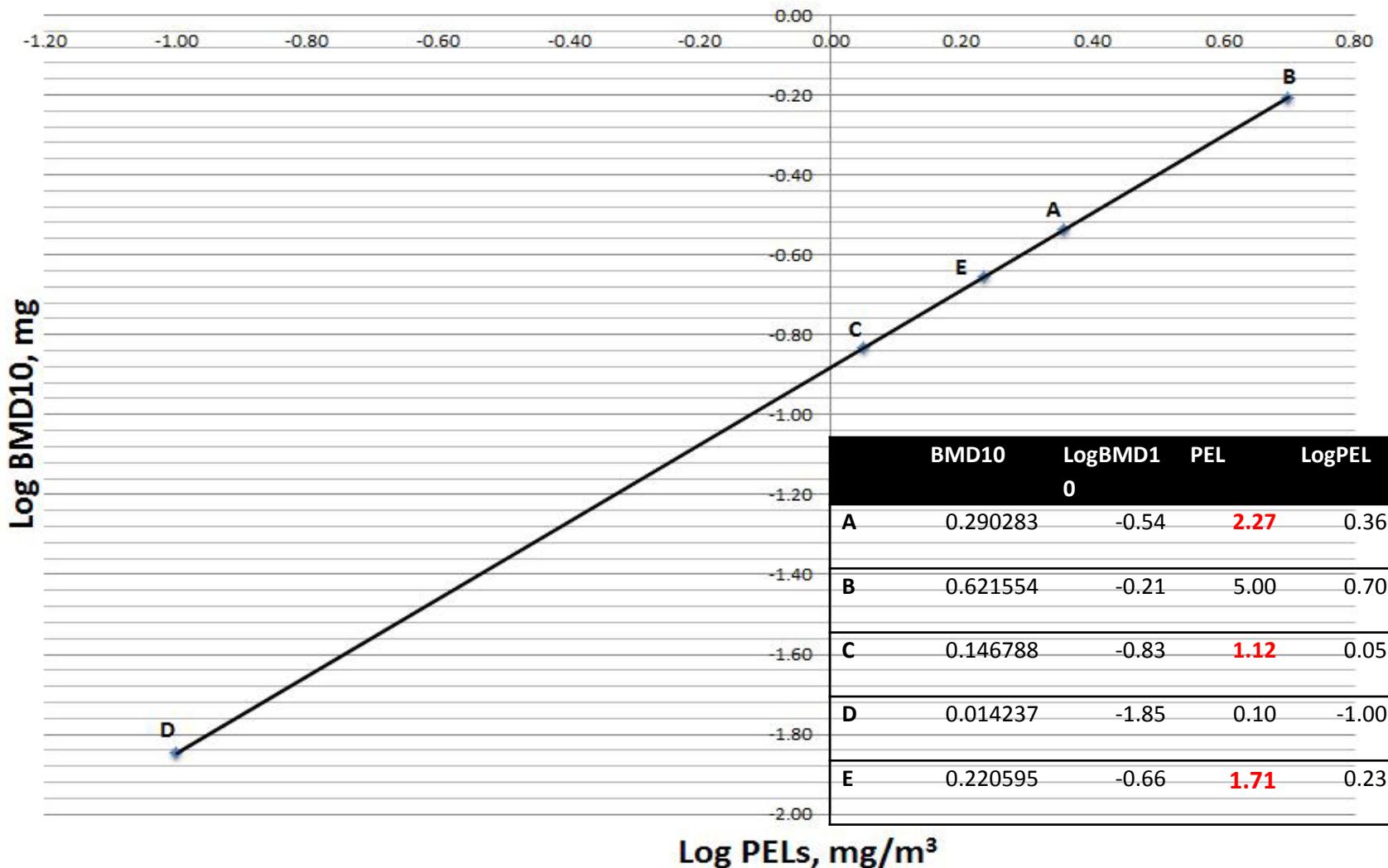
## Total Protein 28 Day Mark



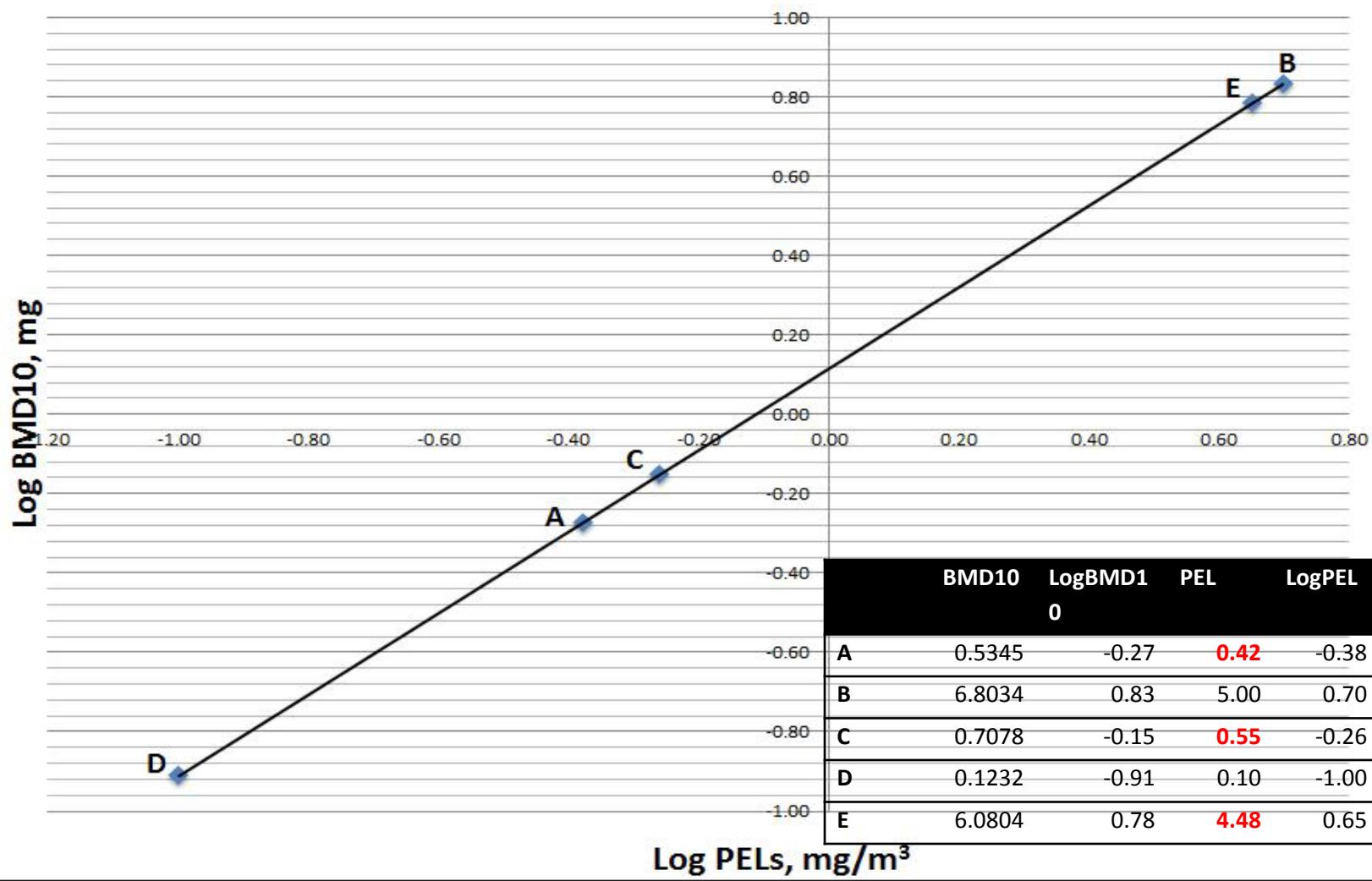
# % Blood Neutrophil Level 7 Day Mark



# AST Level 28 Day Mark



## MCP-1 Levels 7 Day Mark



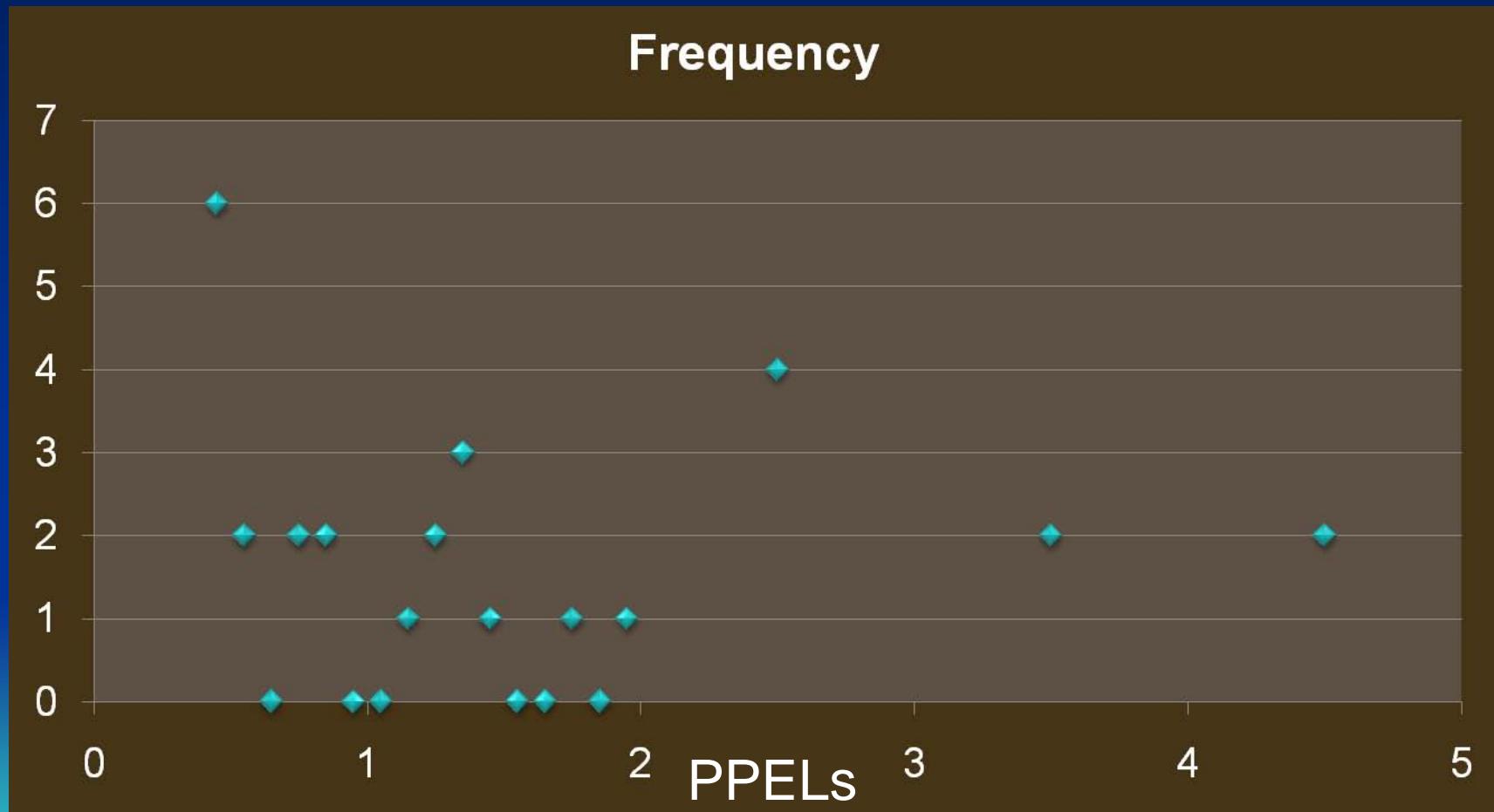
# Test for Similarity of PPELs

- Wilcoxon Rank Sum Test

Comparison		Comparison		Comparison	
A (9)	95	A (9)	121	C (11)	122
C(11)	115	E (11)	116	E (11)	132



# Array of PPELs



# Proposed PPEL

- PELs for Quartz and TiO<sub>2</sub> are for lifetime intermittent exposures
- PPEL for moon dust applies for 6 months of intermittent exposure
- 0.4 mg/m<sup>3</sup> would be very conservative
- 1.0 mg/m<sup>3</sup> would be more defensible

